Colorado Secretary of State 1700 Broadway, Suite 270 Denver, CO 80290 (303) 894-2200 (303) 869-4861 Fax www.sos.state.co.us



CANDIDATE ACCEPTANCE OF DESIGNATION AND DECLARATION OF QUALIFICATION GOVERNOR

[C.R.S. 1-4-601 & 1-4-1304]

To the Honorable Gigi Dennis, Colorado Secretary of State:

This is to certify that the undersigned accepts the nomination for the office listed and that I am qualified to hold said office upon election and that the following information is true and correct to the best of my belief and how I wish my name to appear on the official ballot:

Title of Office/District:		
Name of Candidate: (WARNI Address of Candidate:		
Address of Candidate: (WARNI	NG: THIS IS HOW YOUR NAME WILL APPEAR ON	THE BALLOT)
City, State, Zip Code:		
Party Affiliation:		
County of Registration:	Precinct of Registration	:
Date of Birth of Candidate:		
Qualifications for Office: At least 30 years of age, resident of Colorado at least two years prior to the election and a citizen of the United States of America.		
Candidate Signature		Date
STATE OF COLORADO COUNTY OF		
Subscribed and affirmed before me this	day of	, 20
SEAL	NOTARY PUBLIC	
	My Commission Expires:	

Revised October 2005